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12/08/04 13:20 :03/03 NO:248

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3M INNOVATIVE PROPERTIES COMPANY
PO BOX 33427
ST. PAUL, MN 55133-3427

12/09/2004 SDENB02 00000014 133723 10798581

01 FC:1501 1400.00 DA
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Susan M. Decker (Depositor's name)
Susan M. Decker (Signature)
December 8, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10798581	03/11/2004	Graham J. Bostock	51357US040	6363

TITLE OF INVENTION: FLAT-FOLDED PERSONAL RESPIRATORY PROTECTION DEVICES AND PROCESSES FOR PREPARING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	02/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MITCHELL, TEENA KAY	3743	128-206190

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1. Karl G. Hanson
2.
3.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

3M Innovative Properties Company

St. Paul, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date 12-8-04

Typed or printed name

Karl G. Hanson

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FACSIMILE TRANSMITTAL FORM

FACSIMILE TRANSMITTAL FORM	Application Number	10/798581
	Filing Date	March 11, 2004
	First Named Inventor	Bostock, Graham J.
	Art Unit	3743
	Examiner Name	Teena Kay Mitchell
Fax: 703-746-4000	Attorney Docket Number	51357US040
Total Number of Pages in This Submission: 3		
Date: December 8, 2004	Attorney for Applicant: Karl G. Hanson	

ENCLOSURES

(check all that apply)

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<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Appeal Communication to Technology Center (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Proprietary Information
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